



**SHERIFF OF COOK COUNTY
COURT SERVICES DEPARTMENT
SUMMARY PUNISHMENT ACTION REQUEST**

GRIEVANCE NUMBER		

YR. DIV. NUM.

I.S.U. # _____
(Inspectional Unit Services)

I.A.D. # SPR 10-1480
(Internal Affairs Division)

AFFECTED MEMBER	NAME (LAST, FIRST, M.I.) Spino, Samuel	STAR NUMBER 11055	JDE # [REDACTED]	DATE NOTIFIED <u>02 JUN 10</u>
	RANK Deputy Sheriff IIB	FACILITY/UNIT Court Services W/L/E		
INITIATING SUPERVISOR	NAME (LAST, FIRST, M.I.) Smith, Robert E.	STAR NUMBER 515	DATE OF INCIDENT See Below	DATE INITIATED 18 May 10
	RANK Lieutenant	FACILITY/UNIT Court Services W/L/E		
INDICATE LESS SERIOUS TRANSGRESSION: (reference Summary Punishment General Order) Violation of Medical Procedures				
REMARKS	On 03/12/10, 04/20/10, 04/21/10, Deputy Samuel Spino called into the office to report his absence for the above days, without prior authorization and without having accrued medical time. These call off's resulted in 3 day's of non-pay status. In violation of G.O. 3101.2, VI, B, 1, C&D. D/S S. Spino was counseled on 02/22/10 for the same infraction.			
RECOMMENDED DISCIPLINARY ACTION				
<input checked="" type="checkbox"/> WRITTEN REPRIMAND <input type="checkbox"/> 1 DAY WITHOUT PAY <input type="checkbox"/> 2 DAYS WITHOUT PAY <input type="checkbox"/> 3 DAYS WITHOUT PAY				
INITIATING SUPERVISOR SIGNATURE & STAR NUMBER <u>G. R - C. A. 515</u>				
I have reviewed this S.P.A.R. and I: <input checked="" type="checkbox"/> accept the recommended Summary Punishment and waive my right to a hearing. <input type="checkbox"/> do NOT accept the recommended Summary Punishment and request a hearing. <input type="checkbox"/> do NOT accept the recommended Summary Punishment and request a Grievance procedure.				
AFFECTED MEMBER SIGNATURE & STAR NUMBER: <u>[Signature] 11055</u>				
<input type="checkbox"/> I concur with the recommended Summary Punishment. <input checked="" type="checkbox"/> I do not concur with the recommended Summary Punishment. (See attached To-From Memo)				
FACILITY/UNIT HEAD SIGNATURE & STAR NUMBER: <u>[Signature] 3101</u>				
DIVISION HEAD SIGNATURE & STAR NUMBER: <u>[Signature]</u>				
If the Facility/Unit Head makes an alternate recommendation, the initiating supervisor shall complete a new S.P.A.R. form with the alternate recommendation.				
HEARING				
HEARING OFFICER	NAME (LAST, FIRST, M.I.)	STAR NUMBER	HEARING DATE	
	RANK	DIVISION		
Based upon the findings of this hearing I, as the Hearing Officer, make the following determination: <input type="checkbox"/> I concur with the recommended Summary Punishment. <input type="checkbox"/> I do not concur with the recommended Summary Punishment. <input type="checkbox"/> I recommend:				
HEARING OFFICER SIGNATURE & STAR NUMBER: <input type="checkbox"/> I accept the recommendation of the Hearing Officer and waive my right to a hearing with the Complaint Review Panel. <input type="checkbox"/> I do NOT accept the recommendation of the Hearing Officer and request a hearing with the Complaint Review Panel.				
AFFECTED MEMBER SIGNATURE & STAR NUMBER:				
FINAL DISPOSITION:				
CHIEF DEPUTY SHERIFF'S SIGNATURE: <u>[Signature]</u> DATE: <u>14 JUNE 10</u>				

**COOK COUNTY SHERIFF
COURT SERVICES DEPARTMENT
MEMORANDUM**

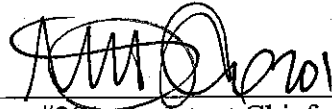
TO: J. McArdle, Chief, Civil Division **DATE:** 07 Jun 2010

FROM: M. DiCaro #201, Assistant Chief, Eviction Levy and Warrant Unit

SUBJECT: Summary Punishment Action Request (SPR10-1480)

Attached please find a Summary Punishment Action Request (SPAR) for Deputy Sheriff S. Spino #11055 dated 02 Jun 2010. The SPAR (SPR10-1480) cites violation of medical procedures and indicates Deputy Sheriff Spino called in medical without accrued medical time on 12 Mar 2010, 20 Apr 2010 and 21 Apr 2010.

As you are aware, a similar situation arose with members of the Third Watch. In that case, the discipline was recalled and Lieutenant Smith was instructed to complete all discipline relevant to unauthorized absences with 15 days of the occurrence. In the interest of fairness, Reporting Assistant Chief is disapproving this SPAR form because the discipline is not timely.



M. DiCaro #201, Assistant Chief
Eviction, Levy and Warrant Unit

Approved: _____

